Express Mail Label No.: EV 869875779 US 07-11-08 Attorney Docket No.: 34251-502NATL. Date of Deposit: July 10, 2008 PART B - FEE(S) TRANSMITTAL Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 (571)-273-2885 or <u>Fax</u> TIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where the state of the current correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as dicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) 7590 05/23/2008 Certificate of Mailing or Transmission MINTZ, LEVIN, COHN, FERRIS. GLOVSKY AND POPEO, P.C. I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. BOSTON, MA 02111 (Depositor's name 07/14/2008 SSESHÉ2 00000038 10509770 1440.00 DP 01 FC:1501 (Date) 300.00 OP 02 FC:1504 CONFIRMATION NO. ATTORNEY DOCKET NO. FIRST NAMED INVENTOR APPLICATION NO. FILING DATE 34251-502 NATL. 2138 09/28/2004 Michael Philip Cohen 10/509.770 TITLE OF INVENTION: PYRIDINOYLPIPERIDINES AS 5-HT1F AGONISTS PREV. PAID ISSUE FEE TOTAL FEE(S) DUE PUBLICATION FEE DUE DATE DUE APPLN. TYPE SMALL ENTITY ISSUE FEE DUE 08/25/2008 \$0 \$1740 \$300 NO \$1440 nonprovisional ART UNIT CLASS-SUBCLASS EXAMINER CHANG, CELIA C 514-318000 1. Change of correspondence address or indication of Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list l Ivor R. Elrifi (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. 2 Heidi A. Erlacher (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is Cohn P.C "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer ntz, Levin, Cohr ovsky and Popeo, Ferris, Number is required. listed, no name will be printed. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (B) RESIDENCE: (CITY and STATE OR COUNTRY) (A) NAME OF ASSIGNEE Indianapolis, Indiana 46285 Eli Lilly and Company Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🖾 Corporation or other private group entity 🚨 Government Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) 4b. Payment of A check is enclosed. 4a. The following fee(s) are submitted: Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached. XXI The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-0311 (enclose an extra copy of this for (enclose an extra copy of this form). (Customer No. 30623) Ref. No. 34251-502NATL.)

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Authorized Signature

July 10, 2008

57,977 Registration No.

Jennifer L. Loebach Typed or printed name

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden; should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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(Depositor's name)
(Signature)
(Date)

APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 10/509,770 09/28/2004 Michael Philip Cohen 34251-502 NATL. 2138

TITLE OF INVENTION: PYRIDINOYLPIPERIDINES AS 5-HT1F AGONISTS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1440	\$300	\$0	\$1740	08/25/2008
EXAMINER		ART UNIT	CLASS-SUBCLASS]		
CHANG, CELIA C		1625	514-318000			
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 		_{era 2} Heidi A	Elrifi . Erlacher Levin, Cohn, Fo and Popeo, P.C

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Eli Lilly and Company

Indianapolis, Indiana 4628

EII LILLY and Company	Indianapolis, Indiana 40205				
Please check the appropriate assignee category or categories (will not be	e printed on the patent): 🔲 Individual 👺 Corporation or other private group entity 🛄 Government				
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Typed or printed name Jennifer L. Loebach	Registration No. 57,977				

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